



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Tour et al.

Serial No.: 10/632,948

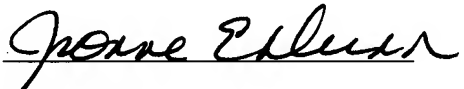
Filing Date: August 1, 2003

Art Unit: 1775

Title: Process for Making Polymers
Comprising Derivatized Carbon Nanotubes
And Compositions ThereofMail Stop: Amendment
Commissioner for Patents
P.O. Box 1450
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Signature: 

Printed: Jeanne E. Dunn

Date: January 29, 2004

SECOND PRELIMINARY AMENDMENT

Dear Sir:

This Second Preliminary Amendment is being filed simply to revise the specification to include the Serial Number of the parent application, which serial number was unknown at the time the instant application was filed.

AMENDMENT

Prior to examination on the merits, please amend the application as follows:

Amendment to the Specification is reflected on page 2 of this paper.

Remarks begin on page 3 of this paper.



PTO/SB/21 (08-03)

Approved for use through 08/30/2003. OMB 0651-0031

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/632,248	
	Filing Date	August 1, 2003	
	First Named Inventor	James M. Tour	
	Art Unit	1754	
	Examiner Name	Unknown	
Total Number of Pages in This Submission	12	Attorney Docket Number	11321-P022WUD3

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply 2nd Prelim. <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Request for Corrected Filing Receipt, w/copy of Filing Receipt and Supplemental ADS; return postcard
Remarks		
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm or Individual name	Ross Spencer Garsen Winstead Sechrest & Minick P.C.	
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